COMMITTEE REPORT

MADAM PRESIDENT:

The Senate Committee on Insurance and Financial Institutions, to which was referred Senate Bill No. 229, has had the same under consideration and begs leave to report the same back to the Senate with the recommendation that said bill be AMENDED as follows:

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             Page 1, between lines 5 and 6, begin a new paragraph and insert:
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             "Sec. 1. As used in this chapter, "commissioner" means the
 3
         insurance commissioner appointed under IC 27-1-1-2.".
             Page 1, line 6, delete "1." and insert "2.".
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             Page 1, line 7, delete "7" and insert "10".
             Page 1, line 9, delete "2." and insert "3.".
 7
             Page 1, line 10, delete "7" and insert "10".
 8
             Page 1, between lines 10 and 11, begin a new paragraph and insert:
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             "Sec. 4. As used in this chapter, "examiner" has the meaning set
10
         forth in IC 27-1-3.1-4.".
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             Page 1, line 11, delete "3." and insert "5.".
12
             Page 1, line 17, delete "4." and insert "6.".
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             Page 2, line 8, delete "5." and insert "7.".
             Page 2, line 10, delete "7" and insert "10".
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             Page 2, line 11, delete "6." and insert "8.".
             Page 2, between lines 17 and 18, begin a new paragraph and insert:
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17
             "Sec. 9. As used in this chapter, "service provider" means an
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         individual or entity that enters into a contract with a consortium
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         program to provide to the consortium program:
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               (1) administrative;
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               (2) insurance brokerage;
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I	(3) claims administration;	
2	(4) risk control; or	
3	(5) investment management;	
4	services.".	
5	Page 2, line 18, delete "7." and insert "10.".	
6	Page 2, line 18, delete "five (5)" and insert "two (2)".	
7	Page 2, line 35, delete "8." and insert "11.".	
8	Page 2, line 35, delete "body" and insert "authority".	
9	Page 2, delete lines 37 through 42, begin a new paragraph and insert:	
10	"Sec. 12. Except as provided in this chapter, the development,	
11	administration, and operation of a consortium program does no	
12	constitute the business of insurance, and a consortium program is	
13	not subject to the insurance laws of Indiana.	
14	Sec. 13. (a) A consortium program shall:	
15	(1) establish a self-insurance fund with a per claim limit and	
16	an aggregate limit on the total amount of self-insured risk	
17	retained by the members in a fiscal year; and	
18	(2) maintain excess insurance coverage that has been reviewed	
19	and approved by the commissioner.	
20	(b) A self-insurance fund established under subsection (a) must	
21	be:	
22	(1) actuarially sound; and	
23	(2) funded at the beginning of each fiscal year by a	
24	contribution from each member in an amount that reflects the	
25	member's share of self-insured risk and other costs of the	
26	consortium program.	
27	(c) Annual contributions to the self-insurance fund under	
28	subsection (b) must be:	
29	(1) determined using generally accepted actuarial standards;	
30	and	
31	(2) set to fund, at the beginning of each fiscal year, at least one	
32	hundred percent (100%) of the self-insured risk retained by	
33	the members in a fiscal year plus the other costs of the	
34	consortium program, including premiums for excess	
35	insurance coverage.	
36	Sec. 14. (a) The governing authority of the consortium program	
37	shall adopt bylaws, including the following:	
38	(1) A financial plan setting forth in general terms:	
39	(A) the types of risks covered under the consortium	
40	program;	
41	(B) the per claim limit and the aggregate limit on the total	
42	amount of self-insured risk retained by the consortium	

1	program in a fiscal year;		
2	(C) the minimum amount of excess insurance coverage that		
3	must be maintained by the consortium program; and		
4	(D) the procedure for determining each member's annual		
5	contribution to the self-insurance fund.		
6	(2) A plan of management that provides for:		
7	(A) the responsibility of the governing authority with		
8	regard to:		
9	(i) maintaining the amount of reserves in the		
10	self-insurance fund;		
11	(ii) disposing of surpluses; and		
12	(iii) administering the consortium program in the event		
13	of termination;		
14	(B) the basis on which new members may be admitted to		
15	the consortium program;		
16	(C) the basis on which participating members may		
17	withdraw from the consortium program, including a:		
18	(i) thirty (30) day period at the end of each fiscal year		
19	after the consortium program's first year of operation		
20	during which a member may withdraw; and		
21	(ii) requirement that a withdrawing member remains		
22	jointly and severally liable for any claim arising during		
23	the period during which the withdrawing member was a		
24	member; and		
25	(D) other provisions necessary or desirable for the		
26	operation of the consortium program.		
27	(3) A conflict of interest policy for:		
28	(A) employees; and		
29	(B) service providers;		
30	of the consortium program.		
31	(b) The following must be submitted to and approved by the		
32	commissioner before a consortium program may commence		
33	operations:		
34	(1) A copy of the bylaws described in subsection (a).		
35	(2) The form of any insurance contracts purchased by the		
36	consortium program, including contracts for excess insurance		
37	coverage.		
38	(3) An accounting, based on generally accepted actuarial		
39	standards, of sufficient reserves committed to pay obligations		
40	of the consortium program.		
41	(4) A copy of each coverage document form to be issued by the		
42	consortium program.		

1	(5) Any other information determined necessary by the
2	commissioner.
3	(c) If the commissioner does not disapprove the information
4	submitted under subsection (b) earlier than thirty (30) days after
5	the information is submitted, the information is considered
6	approved.
7	Sec. 15. (a) A consortium program may enter into a contract
8	with a service provider to obtain the services of the service
9	provider.
10	(b) A contract entered into under subsection (a) must address
11	the following:
12	(1) The term of the contract.
13	(2) The scope of services and responsibilities of the service
14	provider.
15	(3) Compensation.
16	(4) Periodic reporting to the governing authority of the
17	consortium program.
18	(5) The ownership and confidentiality of information and data
19	utilized by the service provider in performing the service
20	provider's responsibilities under the contract.
21	(6) Compliance with the conflict of interest policy established
22	by the consortium program.
23	(7) Indemnification of the consortium program for negligence
24	of the service provider and proof of errors and omissions
25	insurance.
26	(8) Assignability of the contract.
27	(9) Competition between the service provider and the
28	consortium program during and after the term of the
29	contract.
30	(10) Cancellation of the contract.
31	Sec. 16. (a) A consortium program shall have an annual audit
32	performed by an independent certified public accounting firm
33	$according \ to \ guidelines \ established \ by \ the \ department \ of \ insurance.$
34	(b) Not later than one hundred eighty (180) calendar days after
35	the close of a consortium program's fiscal year, the consortium
36	program must furnish the consortium program's members with
37	audited financial statements certified by an independent certified
38	public accounting firm.
39	(c) Copies of the audit report and certified financial statements

required under this section must be provided to the commissioner and the state board of accounts not later than one hundred eighty

(180) calendar days after the close of the consortium program's

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41 42 fiscal year.

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(d) A consortium program that fails to meet the deadline specified in subsection (c) without having obtained an extension from the commissioner is subject to a civil penalty of fifty dollars (\$50) per day until the required information is received by the commissioner.

- (e) If a consortium program fails to have the annual audit performed as required by subsection (a), the commissioner shall cause the audit to be performed at the expense of the consortium program.
- (f) The working papers of the certified public accountant and other records pertaining to the preparation of the audited financial statements required under this section may be reviewed by the commissioner. The cost of a review under this subsection must be paid by the consortium program.
- Sec. 17. Not later than sixty (60) calendar days after the beginning of a consortium program's fiscal year, the governing authority shall submit the following to the commissioner:
 - (1) A copy of the bylaws adopted by the consortium program.
 - (2) A copy of each coverage document form issued by the consortium program.
 - (3) A copy of the insurance contracts purchased by the consortium program, including contracts for excess insurance coverage.
 - (4) A copy of each service provider contract entered into by the consortium program.
 - (5) A certification by an independent actuary that the reserves in the self-insurance fund are adequate to pay the obligations of the consortium program.
- Sec. 18. (a) If a consortium program fails to comply with the requirements of this chapter, the commissioner shall issue a notice of noncompliance to the consortium program.
- (b) Not later than thirty (30) calendar days after a consortium program receives a notice of noncompliance under subsection (a), the consortium program shall file with the commissioner a written request for time to restore compliance and a plan to restore compliance.
- (c) The commissioner, on receiving the written request and plan to restore compliance filed under subsection (b), may grant a period not longer than one (1) year during which the consortium program may restore compliance.

(d) If:

1	(1) a plan to restore compliance is not filed under subsection	
2	(b);	
3	(2) a plan to restore compliance is filed under subsection (b)	
4	and not approved by the commissioner; or	
5	(3) a plan to restore compliance is filed under subsection (b)	
6	and approved by the commissioner, and at the end of a period	
7	granted under subsection (c) the consortium program is not	
8	in compliance with this chapter;	
9	the commissioner may act to liquidate or rehabilitate the	
0	consortium program under IC 27-9 as if the consortium program	
1	were an insurance company.	
2	Sec. 19. (a) The commissioner or an examiner:	
3	(1) may conduct an examination of a consortium program	
4	under IC 27-1-3.1 as often as the commissioner, in the	
5	commissioner's sole discretion, considers appropriate; and	
6	(2) shall conduct an examination of a consortium program	
7	under IC 27-1-3.1 at least once every five (5) years.	
8	(b) Upon determining that an examination described in	
9	subsection (a) is necessary, the commissioner shall issue an	
20	examination warrant:	
21	(1) appointing one (1) or more examiners to perform the	
22	examination; and	
23	(2) instructing the examiners appointed under subdivision (1)	
24	concerning the scope of the examination.	
2.5	(c) In conducting an examination under this section, an	
26	examiner shall observe the requirements set forth in the NAIC	
27	examiner's handbook (as defined in IC 27-1-3.1-6), to the extent	
28	that the requirements are consistent with this chapter. The	
29	commissioner may employ additional guidelines or procedures	
0	necessary to determine a consortium program's compliance with	
1	this chapter.	
2	Sec. 20. (a) A consortium program is subject to IC 27-4-1 as it	
3	the consortium program were an insurance company.	
4	(b) The rights of a claimant under a consortium program are in	
5	no event less than the rights of a claimant under an insurance	
6	contract issued by an insurance company authorized to do business	
37	under IC 27.	
8	Sec. 21. The commissioner shall, not later than February 1 of	
9	each year, report to the legislative council in an electronic format	
0	under IC 5-14-6. The report must include the following information	

(1) A description of the scope of the market of coverage

for the previous calendar year:

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1	under:	
2	(A) insurance contracts; and	
3	(B) consortium programs;	
4	serving independent educational institutions.	
5	(2) The number of complaints filed against a consortium	
6	program under IC 27-4-1.	
7	(3) The number of independent educational institutions	
8	participating in consortium programs.	
9	(4) The loss history of each consortium program.	
10	Sec. 22. An insurance producer that conducts business with a	
11	consortium program must be licensed as an insurance producer	
12	under IC 27-1-15.6.	
13	Sec. 23. (a) Motor vehicle coverage provided by a consortium	
14	program must provide the ability for a member to respond in	
15	damages for liability arising out of the ownership, maintenance, or	
16	use of a motor vehicle in amounts at least equal to the amounts	
17	required under IC 9-25-4.	
18	(b) A member that participates in the motor vehicle coverage	
19	provided by a consortium program is considered to meet the	
20	financial responsibility requirements set forth in IC 9-25-4, and an	
21	application for a certificate of self-insurance under IC 9-25-4-11 is	
22	not required.	
23	Sec. 24. Information regarding the:	
24	(1) part of funds; or	
25	(2) liability reserve;	
26	established by a consortium program to satisfy a specific claim or	
27	cause of action is confidential and is not subject to subpoena or	
28	order to produce, except in a supplementary or ancillary	

proceeding to enforce a judgment.

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Sec. 25. The department of insurance may adopt rules under

2	IC 4-22-2 to implement this chapter.".	
3	Delete page 3.	
	(Reference is to SB 229 as introduced	.)
and when so am	nended that said bill do pass.	
Committee Vote	: Yeas 6, Nays 0.	
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		Senator Paul, Chairperson